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Bib Data Sheet

CONFIRMATION NO. 5359

SERIAL NUMBER 10/784,139	FILING DATE 02/20/2004  RULE	CLASS 256	GROUP ART UNIT 3679	ATTORNEY DOCKET NO. 3759600-144128
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## APPLICANTS

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## \*\* CONTINUING DATA \*\*\*\*\*

This appln claims benefit of 60/448,638 02/20/2003 *OK*

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

*None*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*

\*\* 05/17/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY OH	SHEETS DRAWING 6	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature <i>[Signature]</i>	Initials <i>[Initials]</i>		

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## TITLE

Protection device for roof and floor openings

FILING FEE  RECEIVED 450	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue )
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